| B1 (Official Form 1)(1/08)  |  |  |                                      |  |  |  |   |  |
|---|--|--|--------------------------------------|--|--|--|---|--|
| United States Bankruptcy Court District of Nevada   |  |  |                                      |  | Voluntary  | Petition   |   |  |
| Name of Debtor (if individual, enter Last, First, McDonough, Steven James   |  | Name of Joint Debtor (Spouse) (Last, First, Middle):  LeMond, Gabriele Charlotte           |                                      |  |  |  |   |  |
| All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):  |  |  |                                      |  | used by the I maiden, and  |  | in the last 8 years<br>):   |  |
| Last four digits of Soc. Sec. or Individual-Taxpa (if more than one, state all)  xxx-xx-0611  | yer I.D. (ITIN) No./   | Complete EIN   |                                      | our digits one, see than one, see than one, see than one, see than one of the control of the con | tate all)  | : Individual-7   | Гахрауег I.D. (ITIN) N  | o./Complete EIN                                |
| Street Address of Debtor (No. and Street, City, a 855 N. Stephanie St # 2721 Henderson, NV  | _  | ZIP Code   | 85                                   |  | phanie St  |  | reet, City, and State):   | ZIP Code                                       |
| County of Residence or of the Principal Place of<br>Clark   |  | 89014  | Count                                | -  | ence or of the   | Principal Pla  | ace of Business:  | 89014  |
| Mailing Address of Debtor (if different from stre   | eet address):  |  | Mailir                               | ng Address   | of Joint Debt  | or (if differen  | nt from street address):  |  |
|   | г  | ZIP Code   | 4                                    |  |  |  |   | ZIP Code                                       |
| Location of Principal Assets of Business Debtor (if different from street address above):   |  |  | •                                    |  |  |  |   |  |
| (Form of Organization) (Check one box)  ■ Individual (includes Joint Debtors)  See Exhibit D on page 2 of this form.  □ Corporation (includes LLC and LLP)  □ Partnership □ Other (If debtor is not one of the above entities, check this box and state type of entity below.)            | ☐ Health Care Bu☐ Single Asset Rin 11 U.S.C. §☐ Railroad☐ Stockbroker☐ Commodity Br☐ Clearing Bank☐ Other☐ Tax-Exe | eal Estate as of 101 (51B)  oker  empt Entity (a, if applicable) exempt organof the United | nization<br>States                   | defined<br>"incurr   | er 7<br>er 9<br>er 11<br>er 12   | Creation of Creation of Creation of Creation (Creation) of Creation of Creation (Creation) of Creation | busir   | eding<br>Recognition                           |
| Filing Fee (Check on  Full Filing Fee attached  Filing Fee to be paid in installments (applica attach signed application for the court's cons is unable to pay fee except in installments. R  Filing Fee waiver requested (applicable to chattach signed application for the court's cons | ble to individuals or<br>ideration certifying t<br>ule 1006(b). See Offi<br>napter 7 individuals                   | that the debto<br>icial Form 3A.<br>only). Must  | r Check                              | Debtor is if: Debtor's ato insiders all applica A plan is Acceptant  | a small busin<br>not a small b<br>aggregate nor<br>s or affiliates)<br>ble boxes:<br>being filed w | usiness debto<br>acontingent li<br>are less than<br>ith this petition<br>were solicinaccordance v  | defined in 11 U.S.C. or as defined in 11 U.S.c. or as defined in 11 U.S. iquidated debts (exclude 1\$2,190,000.  on. ted prepetition from or with 11 U.S.C. § 1126( | .C. § 101(51D). ling debts owed ne or more b). |
| Statistical/Administrative Information  ■ Debtor estimates that funds will be available  □ Debtor estimates that, after any exempt prop there will be no funds available for distributi   | erty is excluded and   | administrativ  |                                      | es paid,   |  | THIS   | SPACE IS FOR COURT  | USE ONLY                                       |
| <u>1</u> - <u>50</u> - <u>100</u> - <u>200</u> -  | 1,000- 5,001-<br>5,000 10,000  | 10,001-  | 25,001-<br>50,000                    | 50,001-<br>100,000   | OVER 100,000   |  |   |  |
| \$0 to \$50,001 to \$100,001 to \$500,001 \$50,000 \$100,000 \$500,000 to \$1   | \$1,000,001 \$10,000,001 to \$10 to \$50 million million   | \$50,000,001<br>to \$100   | \$100,000,001<br>to \$500<br>million | \$500,000,001<br>to \$1 billion  |  |  |   |  |
| Estimated Liabilities   | \$1,000,001 \$10,000,001 to \$10 to \$50   | \$50,000,001   |                                      | \$500,000,001 to \$1 billion   |  |  |   |  |

B1 (Official Form 1)(1/08) Page 2 Name of Debtor(s): Voluntary Petition McDonough, Steven James LeMond, Gabriele Charlotte (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Case Number: Location Date Filed: Where Filed: - None -Date Filed: Location Case Number: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) (To be completed if debtor is required to file periodic reports (e.g., I, the attorney for the petitioner named in the foregoing petition, declare that I forms 10K and 10Q) with the Securities and Exchange Commission have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition. X /s/ Anthony J. DeLuca June 2, 2009 Signature of Attorney for Debtor(s) (Date) Anthony J. DeLuca Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ■ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

B1 (Official Form 1)(1/08)

**Signatures** 

#### **Voluntary Petition**

(This page must be completed and filed in every case)

#### McDonough, Steven James LeMond, Gabriele Charlotte

Name of Debtor(s):

#### Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

#### X /s/ Steven James McDonough

Signature of Debtor Steven James McDonough

#### X /s/ Gabriele Charlotte LeMond

Signature of Joint Debtor Gabriele Charlotte LeMond

Telephone Number (If not represented by attorney)

June 2, 2009

Date

#### Signature of Attorney\*

#### X /s/ Anthony J. DeLuca

Signature of Attorney for Debtor(s)

#### Anthony J. DeLuca 006952

Printed Name of Attorney for Debtor(s)

#### **DeLuca & Associates**

Firm Name

5830 West Flamingo Road Suite 233 Las Vegas, NV 89103

Address

#### (702) 873-5386 Fax: (702) 873-5903

Telephone Number

#### June 2, 2009

Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

#### $Signature\ of\ Debtor\ (Corporation/Partnership)$

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

 $\mathbf{X}$ 

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of a Foreign Representative

6/02/09 10:28AM

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

#### Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

X

Date

Address

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

B 1D(Official Form 1, Exhibit D) (12/08)

### United States Bankruptcy Court District of Nevada

|       |  | District of Nevaua |          |    |
|-------|--|--------------------|----------|----|
| In re | Steven James McDonough Gabriele Charlotte LeMond |                    | Case No. |    |
|       |  | Debtor(s)          | Chapter  | 13 |

## EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] \_\_\_\_

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

B 1D(Official Form 1, Exhibit D) (12/08) - Cont.

| ☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable            |
|---|
| statement.] [Must be accompanied by a motion for determination by the court.]                               |
| ☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or                  |
| mental deficiency so as to be incapable of realizing and making rational decisions with respect to          |
| financial responsibilities.);   |
| ☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being               |
| unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or |
| through the Internet.);   |
| ☐ Active military duty in a military combat zone.   |
|   |

☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

| Signature of Debtor: | /s/ Steven James McDonough |
|----------------------|----------------------------|
|                      | Steven James McDonough     |
| Date: June 2, 2009   |                            |

B 1D(Official Form 1, Exhibit D) (12/08)

## United States Bankruptcy Court District of Nevada

|  | District of 1 to tada |                           |   |
|--|-----------------------|---------------------------|---|
| Steven James McDonough Gabriele Charlotte LeMond |                       | Case No.                  |   |
|  | Debtor(s)             | Chapter                   | 13  |
|  |                       | Gabriele Charlotte LeMond | Steven James McDonough Gabriele Charlotte LeMond Case No. |

## EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] \_\_\_\_

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

B 1D(Official Form 1, Exhibit D) (12/08) - Cont.

☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

| Signature of Debtor: | /s/ Gabriele Charlotte LeMond |
|----------------------|-------------------------------|
|                      | Gabriele Charlotte LeMond     |
| Date: June 2, 2009   |                               |

6/02/09 10:28AM B 201 (12/08)

## UNITED STATES BANKRUPTCY COURT DISTRICT OF NEVADA

## NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

#### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

#### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

#### <u>Chapter 7</u>: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total Fee \$299)

- 1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.
- 2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.
- 3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.
- 4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

## <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments

B 201 (12/08)

B 201 (12/08)

over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

- 2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.
- 3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

#### **Chapter 11:** Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

#### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

#### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

#### **Certificate of Attorney**

I hereby certify that I delivered to the debtor this notice required by § 342(b) of the Bankruptcy Code.

| Anthony J. DeLuca  | X /s/ Anthony J. DeLuca                       | June 2, 2009 |
|--|---|--------------|
| Printed Name of Attorney                                 | Signature of Attorney                         | Date         |
| Address:   |   |              |
| 5830 West Flamingo Road                                  |   |              |
| Suite 233  |   |              |
| Las Vegas, NV 89103                                      |   |              |
| (702) 873-5386   |   |              |
| Cer I (We), the debtor(s), affirm that I (we) have recei | rtificate of Debtor ved and read this notice. |              |
| Steven James McDonough                                   |   |              |
| Gabriele Charlotte LeMond                                | X /s/ Steven James McDonough                  | June 2, 2009 |
| Printed Name(s) of Debtor(s)                             | Signature of Debtor                           | Date         |
| Case No. (if known)                                      | X /s/ Gabriele Charlotte LeMond               | June 2, 2009 |
| ·  | Signature of Joint Debtor (if any)            | Date         |

#### 6/02/09 10:28AM

## United States Bankruptcy Court District of Nevada

| In re | Steven James McDonough,   |         | Case No. |    |
|-------|---------------------------|---------|----------|----|
|       | Gabriele Charlotte LeMond |         |          |    |
| _     |                           | Debtors | Chapter  | 13 |
|       |                           |         | •        |    |

#### **SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE   | ATTACHED<br>(YES/NO) | NO. OF<br>SHEETS | ASSETS            | LIABILITIES  | OTHER    |
|--|----------------------|------------------|-------------------|--------------|----------|
| A - Real Property  | Yes                  | 1                | 99,000.00         |              |          |
| B - Personal Property  | Yes                  | 3                | 19,220.00         |              |          |
| C - Property Claimed as Exempt   | Yes                  | 1                |                   |              |          |
| D - Creditors Holding Secured Claims   | Yes                  | 1                |                   | 198,887.00   |          |
| E - Creditors Holding Unsecured<br>Priority Claims (Total of Claims on Schedule E) | Yes                  | 2                |                   | 9,000.00     |          |
| F - Creditors Holding Unsecured<br>Nonpriority Claims                              | Yes                  | 10               |                   | 936,706.09   |          |
| G - Executory Contracts and<br>Unexpired Leases                                    | Yes                  | 1                |                   |              |          |
| H - Codebtors  | Yes                  | 1                |                   |              |          |
| I - Current Income of Individual<br>Debtor(s)                                      | Yes                  | 1                |                   |              | 5,104.00 |
| J - Current Expenditures of Individual<br>Debtor(s)                                | Yes                  | 2                |                   |              | 4,935.00 |
| Total Number of Sheets of ALL Schedu   | ıles                 | 23               |                   |              |          |
|  | T                    | otal Assets      | 118,220.00        |              |          |
|  |                      |                  | Total Liabilities | 1,144,593.09 |          |

#### United States Bankruptcy Court District of Nevada

| In re | Steven James McDonough,   |         | Case No. |    |
|-------|---------------------------|---------|----------|----|
|       | Gabriele Charlotte LeMond |         |          |    |
| _     |                           | Debtors | Chapter  | 13 |

#### STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

| Type of Liability   | Amount   |
|---|----------|
| Domestic Support Obligations (from Schedule E)  | 9,000.00 |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)  | 0.00     |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed) | 0.00     |
| Student Loan Obligations (from Schedule F)  | 0.00     |
| Domestic Support, Separation Agreement, and Divorce Decree<br>Obligations Not Reported on Schedule E                | 0.00     |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)                           | 0.00     |
| TOTAL   | 9,000.00 |

#### State the following:

| Average Income (from Schedule I, Line 16)  | 5,104.00 |
|--|----------|
| Average Expenses (from Schedule J, Line 18)  | 4,935.00 |
| Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20) | 1,425.00 |

#### State the following:

| Total from Schedule D, "UNSECURED PORTION, IF ANY"     column              |          | 86,287.00    |
|--|----------|--------------|
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column             | 9,000.00 |              |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column |          | 0.00         |
| 4. Total from Schedule F   |          | 936,706.09   |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4)               |          | 1,022,993.09 |

Case 09-19276-lbr Doc 1 Entered 06/02/09 10:30:33 Page 12 of 51

B6A (Official Form 6A) (12/07)

| In re | Steven James McDonough,   | Case No. |
|-------|---------------------------|----------|
|       | Gabriele Charlotte LeMond |          |

Debtors

#### **SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

| 855 N. Stephanie Street #2721 Henderson NV 89014 |  | С   | 99,000.00  | 169,806.00                 |
|--|--|---|--|----------------------------|
| Description and Location of Property             | Nature of Debtor's<br>Interest in Property | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in<br>Property, without<br>Deducting any Secured<br>Claim or Exemption | Amount of<br>Secured Claim |

Sub-Total > **99,000.00** (Total of this page)

Total > **99,000.00** 

(Report also on Summary of Schedules)

6/02/09 10:28AM

B6B (Official Form 6B) (12/07)

| In re | Steven James McDonough,   |
|-------|---------------------------|
|       | Gabriele Charlotte LeMond |

Debtors

#### SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

|     | Type of Property  | N O Description and Location of Property E | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in Property,<br>without Deducting any<br>Secured Claim or Exemption |
|-----|---|--|---|---|
| 1.  | Cash on hand  | cash                                       | С   | 20.00   |
| 2.  | Checking, savings or other financial  | Nevada State Bank joint checking           | С   | 50.00   |
|     | accounts, certificates of deposit, or<br>shares in banks, savings and loan,<br>thrift, building and loan, and<br>homestead associations, or credit<br>unions, brokerage houses, or<br>cooperatives. | Nevada State Bank checking                 | С   | 50.00   |
| 3.  | Security deposits with public utilities, telephone companies, landlords, and others.  | Х  |   |   |
| 4.  | Household goods and furnishings, including audio, video, and computer equipment.  | household goods                            | С   | 1,500.00  |
| 5.  | Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.  | X  |   |   |
| 6.  | Wearing apparel.  | clothing                                   | С   | 500.00  |
| 7.  | Furs and jewelry.   | x  |   |   |
| 8.  | Firearms and sports, photographic, and other hobby equipment.   | X  |   |   |
| 9.  | Interests in insurance policies.<br>Name insurance company of each<br>policy and itemize surrender or<br>refund value of each.  | X  |   |   |
| 10. | Annuities. Itemize and name each issuer.  | X  |   |   |
|     |   |  |   |   |

| Sub-Total >          | 2,120.00 |
|----------------------|----------|
| (Total of this page) |          |

<sup>2</sup> continuation sheets attached to the Schedule of Personal Property

 $B6B\ (Official\ Form\ 6B)\ (12/07)$  - Cont.

In re Steven James McDonough,
Gabriele Charlotte LeMond

6/02/09 10:28AM

#### Debtors

#### **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

|     | Type of Property  | N<br>O<br>N<br>E | Description and Location of Property | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in Property,<br>without Deducting any<br>Secured Claim or Exemption |
|-----|---|------------------|--------------------------------------|---|---|
| 11. | Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).) | Х                |                                      |   |   |
| 12. | Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.   | X                |                                      |   |   |
| 13. | Stock and interests in incorporated and unincorporated businesses. Itemize.   | X                |                                      |   |   |
| 14. | Interests in partnerships or joint ventures. Itemize.   | x                |                                      |   |   |
| 15. | Government and corporate bonds and other negotiable and nonnegotiable instruments.  | X                |                                      |   |   |
| 16. | Accounts receivable.  | X                |                                      |   |   |
| 17. | Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.  | X                |                                      |   |   |
| 18. | Other liquidated debts owed to debtor including tax refunds. Give particulars.  | tax refund       |                                      | С   | 2,000.00  |
| 19. | Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.  | x                |                                      |   |   |
| 20. | Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.  | X                |                                      |   |   |
| 21. | Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.  | X                |                                      |   |   |
|     |   |                  |                                      | Sub-Tota                                    | al > <b>2,000.00</b>  |
|     |   |                  | Γ)                                   | Total of this page)                         | ·   |

Sheet <u>1</u> of <u>2</u> continuation sheets attached to the Schedule of Personal Property

6/02/09 10:28AM

In re Steven James McDonough,
Gabriele Charlotte LeMond

#### Debtors

#### **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

|     | Type of Property  | N<br>O<br>N<br>E | Description and Location of Property | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in Property,<br>without Deducting any<br>Secured Claim or Exemption |
|-----|---|------------------|--------------------------------------|---|---|
| 22. | Patents, copyrights, and other intellectual property. Give particulars.   | X                |                                      |   |   |
| 23. | Licenses, franchises, and other general intangibles. Give particulars.  | X                |                                      |   |   |
| 24. | Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | X                |                                      |   |   |
| 25. | Automobiles, trucks, trailers, and  | 2                | 008 Hyundai Santa Fe (15k miles)     | С   | 13,600.00   |
|     | other vehicles and accessories.   | 1                | 993 Honda Accord (150k miles)        | С   | 1,500.00  |
| 26. | Boats, motors, and accessories.   | X                |                                      |   |   |
| 27. | Aircraft and accessories.   | X                |                                      |   |   |
| 28. | Office equipment, furnishings, and supplies.  | X                |                                      |   |   |
| 29. | Machinery, fixtures, equipment, and supplies used in business.  | X                |                                      |   |   |
| 30. | Inventory.  | X                |                                      |   |   |
| 31. | Animals.  | X                |                                      |   |   |
| 32. | Crops - growing or harvested. Give particulars.   | X                |                                      |   |   |
| 33. | Farming equipment and implements.   | X                |                                      |   |   |
| 34. | Farm supplies, chemicals, and feed.   | X                |                                      |   |   |
| 35. | Other personal property of any kind not already listed. Itemize.  | X                |                                      |   |   |

Sub-Total > (Total of this page)

15,100.00

T-4-

Total > 19,220.00

Sheet **2** of **2** continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

6/02/09 10:28AM

In re Steven James McDonough, Case No. \_\_\_\_\_

#### Debtors

#### SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

| Debtor claims the exemptions to which debtor is entitled under: | ☐ Check if debtor claims a homestead exemption that exceeds |
|---|---|
| (Check one box)   | \$136,875.  |
| ☐ 11 U.S.C. §522(b)(2)  |   |
| ■ 11 U.S.C. §522(b)(3)  |   |

| Description of Property   | Specify Law Providing<br>Each Exemption  | Value of<br>Claimed<br>Exemption | Current Value of<br>Property Without<br>Deducting Exemption |
|---|--|----------------------------------|---|
| Real Property<br>855 N. Stephanie Street #2721 Henderson NV<br>89014                  | Nev. Rev. Stat. § 21.090(1)(m)   | 99,000.00                        | 99,000.00   |
| Checking, Savings, or Other Financial Accounts, C<br>Nevada State Bank joint checking | Certificates of Deposit<br>Nev. Rev. Stat. § 21.090(1)(g)                            | 50.00                            | 50.00   |
| Nevada State Bank checking  | Nev. Rev. Stat. § 21.090(1)(g)   | 50.00                            | 50.00   |
| Household Goods and Furnishings household goods                                       | Nev. Rev. Stat. § 21.090(1)(b)   | 1,500.00                         | 1,500.00  |
| Wearing Apparel clothing  | Nev. Rev. Stat. § 21.090(1)(b)   | 500.00                           | 500.00  |
| Other Liquidated Debts Owing Debtor Including Tatax refund                            | <u>x Refund</u><br>Nev. Rev. Stat. § 21.090(1)(z)<br>Nev. Rev. Stat. § 21.090(1)(aa) | 2,000.00<br>Unknown              | 2,000.00  |
| Automobiles, Trucks, Trailers, and Other Vehicles 2008 Hyundai Santa Fe (15k miles)   | Nev. Rev. Stat. § 21.090(1)(f)   | 13,600.00                        | 13,600.00   |
| 1993 Honda Accord (150k miles)  | Nev. Rev. Stat. § 21.090(1)(f)   | 1,500.00                         | 1,500.00  |

Total: 118,200.00 118,200.00

B6D (Official Form 6D) (12/07)

| In re | Steven James McDonough,   |
|-------|---------------------------|
|       | Gabriele Charlotte LeMond |

6/02/09 10:28AM

Debtors

#### SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

|  | _               | _      |  | _           | _           |    |  |                                 |
|--|-----------------|--------|--|-------------|-------------|----|--|---------------------------------|
| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B T O R | M<br>H | sband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED,  NATURE OF LIEN, AND  DESCRIPTION AND VALUE  OF PROPERTY  SUBJECT TO LIEN | CONTINGEN   | 7-05-C      | Εl | AMOUNT OF<br>CLAIM<br>WITHOUT<br>DEDUCTING<br>VALUE OF<br>COLLATERAL | UNSECURED<br>PORTION, IF<br>ANY |
| Account No. 6000095543   |                 |        | Opened 7/01/05 Last Active 12/17/08  | ] ⊤         | ATE         |    |  |                                 |
| Discover Financial Ser<br>P.o Box 5005<br>Sioux Fall, SD 57117                                       |                 | С      | Second Mortgage<br>855 N. Stephanie Street #2721<br>Henderson NV 89014   |             | D           |    |  |                                 |
|  | ╀               | -      | Value \$ 99,000.00   | _           |             |    | 70,942.00  | 70,806.00                       |
| M&t Bank 1 Fountain Plz Fl 3 Buffalo, NY 14203   |                 | С      | Opened 7/01/08 Last Active 4/08/09 Auto Loan 2008 Hyundai Santa Fe (15k miles)   |             |             |    |  |                                 |
|  |                 |        | Value \$ 13,600.00   | 1           |             |    | 29,081.00  | 15,481.00                       |
| Account No. 9540021242052  Mortgage Service Cente Sbrp - 4001 Leadenhall Rd Mt Laurel, NJ 08054      |                 | С      | Opened 1/01/03 Last Active 12/15/08  First Mortgage  855 N. Stephanie Street #2721  Henderson NV 89014                               |             |             |    |  |                                 |
|  |                 |        | Value \$ 99,000.00   |             |             |    | 98,864.00  | 0.00                            |
| Account No.  |                 |        | Value \$   |             |             |    |  |                                 |
| continuation sheets attached   |                 |        | (Total of t  | Subt<br>his |             |    | 198,887.00   | 86,287.00                       |
|  |                 |        | (Report on Summary of So   |             | ota<br>lule |    | 198,887.00   | 86,287.00                       |

B6E (Official Form 6E) (12/07)

| In re | Steven James McDonough,   | Case No. |
|-------|---------------------------|----------|
|       | Gabriele Charlotte LeMond |          |

Debtors

#### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

#### ■ Domestic support obligations

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

#### ☐ Extensions of credit in an involuntary case

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

#### ☐ Wages, salaries, and commissions

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

#### ☐ Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

#### ☐ Certain farmers and fishermen

Claims of certain farmers and fishermen, up to \$5,400\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

#### ☐ Deposits by individuals

Claims of individuals up to \$2,425\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

#### ☐ Taxes and certain other debts owed to governmental units

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

#### ☐ Commitments to maintain the capital of an insured depository institution

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).

#### $\square$ Claims for death or personal injury while debtor was intoxicated

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

<sup>\*</sup> Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

6/02/09 10:28AM

In re Steven James McDonough,
Gabriele Charlotte LeMond

Debtors

#### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

#### **Domestic Support Obligations**

TYPE OF PRIORITY CODEBTOR Husband, Wife, Joint, or Community UNLIQUIDATED AMOUNT NOT ENTITLED TO PRIORITY, IF ANY CREDITOR'S NAME, ONTINGENT S P U T E D AND MAILING ADDRESS Н DATE CLAIM WAS INCURRED **AMOUNT** W INCLUDING ZIP CODE, AND CONSIDERATION FOR CLAIM OF CLAIM AMOUNT ENTITLED TO PRIORITY C AND ACCOUNT NUMBER (See instructions.) Child Support Account No. Allison McKella 0.00 547 Ulukanu St Kailua, CA 93734 C 9,000.00 9,000.00 Account No. Account No. Account No. Account No. Subtotal 0.00 Sheet <u>1</u> of <u>1</u> continuation sheets attached to (Total of this page) 9,000.00 9,000.00 Schedule of Creditors Holding Unsecured Priority Claims Total 0.00

(Report on Summary of Schedules)

9,000.00

9,000.00

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B6F (Official Form 6F) (12/07)

| In re | Steven James McDonough,<br>Gabriele Charlotte LeMond |         | Case No |  |
|-------|--|---------|---------|--|
| _     |  | Debtors |         |  |

#### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

| <b>9</b> continuation sheets attached   |                 |        | (Total of  | Sub<br>this |            |                 | 698,570.00      |
|---|-----------------|--------|--|-------------|------------|-----------------|-----------------|
| Account No. 008061883011322332  Amex Po Box 297871  Fort Lauderdale, FL 33329                             |                 | н      | Opened 7/01/87 Last Active 12/01/01<br>CreditCard                            |             |            |                 | 0.00            |
| Account No. 008061883011397743  Amex Po Box 297871 Fort Lauderdale, FL 33329                              |                 | н      |  |             |            |                 | 0.00            |
| Account No. 1061146003498  Americas Servicing Co Attention: Bankruptcy 1 Home Campus Des Moines, IA 50328 |                 | н      | Opened 10/01/05 Last Active 7/01/08 RealEstateMortgageWithoutOtherCollateral |             |            |                 | 137,867.00      |
| Account No. 1061146007730  Americas Servicing Co Attention: Bankruptcy 1 Home Campus Des Moines, IA 50328 | -               | Н      | Opened 10/01/05 Last Active 7/01/08 ConventionalRealEstateMortgage           | T           | TED        |                 | 560,703.00      |
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)         | C O D E B T O R | W<br>J |  | CONTINGEN   | UNLIQUIDAT | D I S P U T E D | AMOUNT OF CLAIM |

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| In re | Steven James McDonough,   | Case No. |
|-------|---------------------------|----------|
|       | Gabriele Charlotte LeMond |          |

| CREDITOR'S NAME,  | C        | Hu          | sband, Wife, Joint, or Community  | Č      | U          | D           |                 |
|---|----------|-------------|---|--------|------------|-------------|-----------------|
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)    | CODEBTOR | C<br>A<br>H | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM<br>IS SUBJECT TO SETOFF, SO STATE. | N<br>G | UND-CO-LZC | U<br>T<br>F | AMOUNT OF CLAIM |
| Account No.   |          |             | НОА   | ] ⊤    | ΙEΙ        |             |                 |
| Antonio Gucci<br>AKA Antonio Gonsalves<br>3351 W. Lani Ikena Way<br>Kihei, HI 96753 |          | С           |   |        | D          |             | 16,500.00       |
| Account No. 22702435  |          |             | Medical   | П      | П          |             |                 |
| Brigham and Women's Hospital<br>PO Box 3320<br>Boston, MA 02241-3320                |          | С           |   |        |            |             | 4 000 45        |
|   |          |             |   |        | Ш          |             | 1,326.45        |
| Account No. 22702435-1  BWPO Anesthesia PO Box 3681 Boston, MA 02241-3681           |          | С           | Medical   |        |            |             | 944.85          |
| Account No. <b>22702435</b>   |          |             |   |        |            |             |                 |
| BWPO Dept of Medicine<br>PO Box 3775<br>Boston, MA 02241-3775                       |          | С           |   |        |            |             | 16.07           |
| Account No. 22702435  | T        |             |   | П      | П          |             |                 |
| BWPO Dept of Radiology<br>PO Box 414124<br>Boston, MA 02241-0001                    |          | С           |   |        |            |             | 18.82           |
| Sheet no1 _ of _9 _ sheets attached to Schedule of                                  |          |             | <u> </u>  | Subt   | ota        | <br>l       |                 |
| Creditors Holding Unsecured Nonpriority Claims                                      |          |             | (Total of t   |        |            |             | 18,806.19       |

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| In re | Steven James McDonough,   | Case No |
|-------|---------------------------|---------|
|       | Gabriele Charlotte LeMond |         |

|  |           |             |   |          | _          |             | -               |
|--|-----------|-------------|---|----------|------------|-------------|-----------------|
| CREDITOR'S NAME,   | C         | Hu          | sband, Wife, Joint, or Community  | CC       | U          | D           |                 |
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)                       | ODE BT OR | J<br>M<br>H | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM<br>IS SUBJECT TO SETOFF, SO STATE. | N        | UNL-QU-DAH | U<br>T<br>F | AMOUNT OF CLAIM |
| Account No. 23959  |           |             | Medical   | ] T      | ΙE         |             |                 |
| C.Eugene Hill, JR, DPM, PC<br>51 Main St.<br>Hyannis, MA 02601   |           | С           |   |          | D          |             | 127.73          |
| Account No.  |           |             | Medical   |          |            |             |                 |
| Cape Cod Dental<br>40 Church Ave. Ste 101<br>Wareham, MA 02571   |           | С           |   |          |            |             |                 |
|  |           |             |   |          |            |             | 577.00          |
| Account No. 529107156160  Capital 1 Bank Attn: C/O TSYS Debt Management Po Box 5155 Norcross, GA 30091 |           | н           | Opened 5/01/99 Last Active 9/29/08<br>CreditCard  |          |            |             | 7,377.00        |
| Account No. 438864250136   |           |             | Opened 2/01/99 Last Active 10/03/08   | П        | П          |             |                 |
| Capital 1 Bank<br>Attn: C/O TSYS Debt Management<br>Po Box 5155<br>Norcross, GA 30091                  |           | н           | CreditCard  |          |            |             | 4,692.00        |
| Account No. <b>61170984</b>  | T         |             |   | $\vdash$ | Г          |             |                 |
| Capital Management Services<br>726 Exchange Street<br>Ste 700<br>Buffalo, NY 14210                     |           | С           |   |          |            |             | 35,894.45       |
| Sheet no. 2 of 9 sheets attached to Schedule of  | -         | _           |   | Subt     | ota        | 1           | 40.000          |
| Creditors Holding Unsecured Nonpriority Claims   |           |             | (Total of t   | his j    | pag        | e)          | 48,668.18       |

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| In re | Steven James McDonough,   | Case No. |
|-------|---------------------------|----------|
|       | Gabriele Charlotte LeMond |          |

|   | С   |         | shood Wife leist or Community   | 16        | U        | D           |                 |
|---|-----|---------|---|-----------|----------|-------------|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | 0 0 | H W J C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGEN | L   Q    | I S P U F L | AMOUNT OF CLAIM |
| Account No. 426683999988  |     |         | Opened 3/01/95 Last Active 9/22/08  | Т         | E        |             |                 |
| Chase<br>201 N. Walnut St//De1-1027<br>Wilmington, DE 19801                                       |     | С       | CreditCard  |           | D        |             | 27,835.00       |
| Account No. <b>540168303600</b>   | t   |         | Opened 4/01/01 Last Active 9/22/08  | +         | $\vdash$ |             |                 |
| Chase<br>Attn: Bankruptcy Dept<br>Po Box 100018<br>Kennesaw, GA 30156                             |     | С       | CreditCard  |           |          |             | 26,258.00       |
| Account No. 542418016395  | •   |         | Opened 10/01/91 Last Active 9/29/08   |           |          |             |                 |
| Citi<br>Po Box 6241<br>Sioux Falls, SD 57117  |     | С       | CreditCard  |           |          |             | 21,519.00       |
| Account No. <b>00052213</b>   | t   |         | Medical   |           |          |             |                 |
| Clinical 1 Home Medical<br>65 E. Mathewson Drive<br>East Weymouth, MA 02189                       |     | С       |   |           |          |             | 20.88           |
| Account No. <b>773-10-210-0237934</b>   | t   |         | Medical   | +         | $\vdash$ |             |                 |
| CMI Credit Management<br>4200 International Pkwy<br>Carrollton, TX 75007-1906                     | -   | С       |   |           |          |             | 207.30          |
| Sheet no. <b>3</b> of <b>9</b> sheets attached to Schedule of                                     | _   |         |   | Sub       | tota     | 1           |                 |
| Creditors Holding Unsecured Nonpriority Claims  |     |         | (Total of   |           |          |             | 75,840.18       |

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| In re | Steven James McDonough,   | Case No |
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|       | Gabriele Charlotte LeMond |         |

|   | С        | ш        | sband, Wife, Joint, or Community  | Tc         | Lii                   | D           |                 |
|---|----------|----------|---|------------|-----------------------|-------------|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | 0 0      | H W J C  | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | COZHLZGWZH | Q<br>U<br>I           | U<br>T<br>E | AMOUNT OF CLAIM |
| Account No. 630448652   |          |          | Opened 8/16/94 Last Active 4/01/08  | ٦          | D<br>A<br>T<br>E<br>D |             |                 |
| Cpu/citi<br>Attn: Centralized Bankruptcy<br>Po Box 20507<br>Kansas City, MO 64195                 |          | С        | CreditCard  |            | D                     |             | 0.00            |
| Account No. 545800110704  | T        |          | Opened 3/27/00 Last Active 4/16/06  | +          |                       |             |                 |
| Direct Merchants Bank<br>Card Member Services - GSC<br>Po Box 5246<br>Carol Stream, IL 60197      |          | Н        | CreditCard  |            |                       |             | 0.00            |
| Account No. 601129862199  |          |          | Opened 1/01/02 Last Active 9/18/08<br>CreditCard  |            |                       |             |                 |
| Discover Fin<br>Attention: Bankruptcy Department<br>Po Box 3025<br>New Albany, OH 43054           |          | С        | CreditCard  |            |                       |             | 12,673.00       |
| Account No. <b>7028985158777</b>  | H        |          |   |            |                       |             |                 |
| Enhanced Recovery Corp.<br>8014 Bayberry Rd.<br>Jacksonville, FL 32256                            |          | С        |   |            |                       |             | 199.19          |
| Account No. 4869557469102371  | $\vdash$ |          | Opened 2/01/09 Last Active 5/01/09  | +          | $\vdash$              |             |                 |
| First Premier Bank<br>3820 N Louise Ave<br>Sioux Falls, SD 57104                                  |          | н        | CreditCard  |            |                       |             | 216.47          |
| Sheet no. <b>4</b> of <b>9</b> sheets attached to Schedule of                                     |          | <u> </u> |   | Sub        | L<br>tota             | ıl          |                 |
| Creditors Holding Unsecured Nonpriority Claims  |          |          | (Total of   | this       | pag                   | ge)         | 13,088.66       |

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| In re | Steven James McDonough,   | Case No |
|-------|---------------------------|---------|
|       | Gabriele Charlotte LeMond |         |

|   | С       | ш.,              | sband, Wife, Joint, or Community  | Tc        | Τυ          | D           |                 |
|---|---------|------------------|---|-----------|-------------|-------------|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | ODEBTOR | H<br>W<br>J<br>C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGEN | L<br>Q<br>U | I S P U T F | AMOUNT OF CLAIM |
| Account No. 274998321211  |         |                  | Opened 7/01/01 Last Active 1/01/03  | Т         | E<br>D      |             |                 |
| Flagstar Bank<br>Attn: Bankruptcy Dept MS-S144-3<br>5151 Corporate Dr<br>Troy, MI 48098           |         | С                | ConventionalRealEstateMortgage  |           |             |             | 0.00            |
| Account No. FGN195TH18  | t       |                  | Opened 12/01/98 Last Active 6/01/99   | +         |             |             |                 |
| Ford Motor Credit Corporation<br>National Bankruptcy Center<br>Po Box 537901<br>Livonia, MI 48153 |         | С                | Lease   |           |             |             | 0.00            |
| Account No. <b>549107001658</b>   | ╁       |                  | Opened 9/07/06 Last Active 9/29/08  | +         | -           |             | 0.00            |
| Hsbc Bank<br>Attn: Bankruptcy<br>Po Box 5253<br>Carol Stream, IL 60197                            |         | н                | CreditCard  |           |             |             | 3,535.00        |
| Account No. <b>91100022797</b>  |         |                  | Opened 9/01/05 Last Active 9/29/06  |           |             |             |                 |
| Hsbc/berpl<br>Pob 15521<br>Wilmington, DE 19805   |         | С                | ChargeAccount   |           |             |             | 0.00            |
| Account No. LEMGA1001   | ╁       |                  | Medical   | +         | -           | H           |                 |
| Jameson B. Noorda, DPM<br>4660 S.Eastern #16<br>Las Vegas, NV 89119-6146                          |         | С                |   |           |             |             | 104.64          |
| Sheet no. 5 of 9 sheets attached to Schedule of   | _       |                  |   | Sub       | tota        | ıl          | 0.000.04        |
| Creditors Holding Unsecured Nonpriority Claims  |         |                  | (Total of   | this      | pag         | ge)         | 3,639.64        |

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| In re | Steven James McDonough,   | Case No. |
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|       | Gabriele Charlotte LeMond |          |

| CREDITOR'S NAME,<br>MAILING ADDRESS  | CODE     | н           | sband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND     | CONTI       | UNLL        | DISPUT |                 |
|--|----------|-------------|---|-------------|-------------|--------|-----------------|
| INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)   | CODEBTOR | C<br>J<br>M | CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | NGENT       | QULDAT      | I -    | AMOUNT OF CLAIM |
| Account No. <b>719802</b>  |          |             | Medical   | ] T         | T<br>E<br>D |        |                 |
| LV Skin & Cancer Clinics, LTD<br>PO BOX 12060<br>Las Vegas, NV 89112   |          | С           |   |             | D           |        | 108.97          |
| Account No. 4483892644120  | ┢        | H           | Opened 10/01/89 Last Active 7/16/01                               | +           | H           | H      |                 |
| Macys/fdsb<br>Macy's Bankruptcy<br>Po Box 8053<br>Mason, OH 45040  |          | н           | ChargeAccount   |             |             |        |                 |
| Account No. MCDON  |          | L           | НОА   | lacksquare  |             | _      | 0.00            |
| Maple Springs I<br>158 Tihonet Road<br>Wareham, MA 02571   | -        | С           | HUA   |             |             |        | 504.00          |
| Account No. <b>5206159</b>   | ╁        | H           |   | $\vdash$    | $\vdash$    |        | 00 1100         |
| NCO Financial Systems Inc<br>PO Box 953<br>Brookfield, WI 53008  |          | С           |   |             |             |        | 005.00          |
| Account No. DQS814   | ╀        | ┞           |   | $\vdash$    | L           | L      | 295.32          |
| NCO Portfolio Management<br>1705 Whitehead Road<br>Gwynn Oak, MD 21207                                       |          | С           |   |             |             |        | 0 724 47        |
| Shoot no. 6 of 0 about the half of 1.1.1.5   | _        | L           |   | 2,,1        |             | L      | 8,734.17        |
| Sheet no. <b>6</b> of <b>9</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims |          |             | (Total of t   | Subt<br>his |             |        | 9,642.46        |

| Case No. |  |  |  |
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In re Steven James McDonough, Gabriele Charlotte LeMond

#### Debtors

### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

|   |               |             |   |          | _           |     |                 |
|---|---------------|-------------|---|----------|-------------|-----|-----------------|
| CREDITOR'S NAME,  | C             | Hu          | sband, Wife, Joint, or Community  | CC       | U           | D   |                 |
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)            | O D E B T O R | C<br>A<br>M | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM<br>IS SUBJECT TO SETOFF, SO STATE. | l<br>N   | NL QU L DAT | UTF | AMOUNT OF CLAIM |
| Account No. N44967  |               |             | 855 N. Stephanie St. #2721 HOA  | Ť        | ΙE          |     |                 |
| Nevada Association Services, Inc.<br>6224 W Desert Inn Road, Suite A<br>Las Vegas, NV 89146 |               | С           |   |          | D           |     | Unknown         |
| Account No. 1002705978  | T             |             | Opened 10/07/05 Last Active 12/30/05  |          |             |     |                 |
| New Century Mortgage C<br>Po Box 15298<br>Wilmington, DE 19850                              |               | н           | RealEstateMortgageWithoutOtherCollateral  |          |             |     | 0.00            |
| Account No. 1002694016  | ┞             |             | Opened 10/07/05 Last Active 12/30/05  | $\vdash$ | $\vdash$    |     | -               |
| New Century Mortgage C Po Box 15298 Wilmington, DE 19850                                    |               | н           | ConventionalRealEstateMortgage  |          |             |     | 0.00            |
| Account No. 2768-350-0022   | ┢             |             |   |          |             |     |                 |
| NStar<br>PO Box 4508<br>Woburn, MA 01888-4508   |               | С           |   |          |             |     | 1,247.00        |
| Account No. 14221014  | t             |             | Medical   |          | T           | t   |                 |
| Peter Roberts & Associates<br>231 E. Main St. Ste. 201<br>Milford, MA 01757-2821            |               | С           |   |          |             |     | 337.88          |
| Sheet no. <b>7</b> of <b>9</b> sheets attached to Schedule of                               | _             | <u> </u>    |   | Subt     | ota         | ıl  | 4.50.100        |
| Creditors Holding Unsecured Nonpriority Claims  |               |             | (Total of t   | his j    | pag         | ge) | 1,584.88        |

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| In re | Steven James McDonough,   | Case No. |
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|       | Gabriele Charlotte LeMond |          |

| CREDITOR'S NAME,  | C        | Hu       | sband, Wife, Joint, or Community   | _  c      | U<br>N<br>L      | P                |                 |
|---|----------|----------|------------------------------------|-----------|------------------|------------------|-----------------|
| MAILING ADDRESS   | CODEBTOR | н        | DATE CLAIM WAS INCURRED AND        | CONT      | ΙË               | S                |                 |
| INCLUDING ZIP CODE,   | B        | W        | CONSIDERATION FOR CLAIM. IF CLAIM  |           | ΙQ               | P<br>U<br>T<br>E | AMOUNT OF CLAIM |
| AND ACCOUNT NUMBER (See instructions above.)                  | o        | C        | IS SUBJECT TO SETOFF, SO STATE.    | G         | Ϊ́               | Ė                | AMOUNT OF CLAIM |
| ·   | R        | Ĺ        |                                    | N G E N T | D<br>A           | D                |                 |
| Account No. <b>73461</b>                                      | 1        |          |                                    | '         | A<br>T<br>E<br>D |                  |                 |
|   | ı        |          |                                    | $\vdash$  | ╀                | ╁                | 4               |
| Roby's Propane Gas Inc.                                       | ı        | С        |                                    |           |                  |                  |                 |
| PO Box 129  | ı        | ۲        |                                    |           |                  |                  |                 |
| West Wareham, MA 02576  | ı        |          |                                    |           |                  |                  |                 |
|   | ı        |          |                                    |           |                  |                  | 251.50          |
|   |          |          |                                    | 丄         | L                | L                | 251.50          |
| Account No. 99901104271000120080801                           |          |          | Opened 8/01/08 Last Active 4/13/09 |           |                  |                  |                 |
|   | 1        |          | Educational                        |           |                  |                  |                 |
| Sallie Mae  | ı        |          |                                    |           |                  |                  |                 |
| Attn: Claims Dept   | ı        | C        |                                    |           |                  |                  |                 |
| Po Box 9500   | ı        |          |                                    |           |                  |                  |                 |
| Wilkes Barre, PA 18773  | ı        |          |                                    |           |                  |                  |                 |
|   |          |          |                                    |           |                  |                  | 3,319.00        |
| Account No. 130862P   |          |          | Medical                            | Τ         | T                | T                |                 |
|   | 1        |          |                                    |           |                  |                  |                 |
| South Shore Anesthesia Assoc                                  | ı        |          |                                    |           |                  |                  |                 |
| 163 Libby Pkwy Ste. 301                                       | ı        | C        |                                    |           |                  |                  |                 |
| East Weymouth, MA 02189                                       | ı        |          |                                    |           |                  |                  |                 |
|   | ı        |          |                                    |           |                  |                  |                 |
|   |          |          |                                    |           |                  |                  | 60.00           |
| Account No. <b>VO6167704763</b>                               | t        |          | Medical                            | +         | +                | t                | <u> </u>        |
|   | 1        |          |                                    |           |                  |                  |                 |
| South Shore Hospital  | ı        |          |                                    |           |                  |                  |                 |
| 55 Fogg Road  | ı        | C        |                                    |           |                  |                  |                 |
| South Weymouth, MA 02190                                      | ı        |          |                                    |           |                  |                  |                 |
|   | ı        |          |                                    |           |                  |                  |                 |
|   |          |          |                                    |           |                  |                  | 659.62          |
| Account No. <b>539680001628</b>                               | ┢        | H        | Opened 7/01/93 Last Active 9/18/08 | +         | +                | +                |                 |
|   | 1        |          | CreditCard                         |           |                  |                  |                 |
| Unvl/citi   | ı        |          |                                    |           |                  |                  |                 |
| Attn.: Centralized Bankruptcy                                 | 1        | С        |                                    |           |                  | 1                |                 |
| Po Box 20507  | 1        |          |                                    |           |                  | 1                |                 |
| Kansas City, MO 64195   | ı        |          |                                    |           |                  |                  |                 |
|   |          |          |                                    |           |                  |                  | 12,489.00       |
| Charter O of O of the first Cold II of                        | 1        | <u> </u> |                                    |           | <u></u>          | <u></u>          | , , ,           |
| Sheet no. <b>8</b> of <b>9</b> sheets attached to Schedule of |          |          | /T-4-1 - E                         | Sub       |                  |                  | 16,779.12       |
| Creditors Holding Unsecured Nonpriority Claims                |          |          | (Total of                          | tn1S      | paş              | ge)              | 1               |

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| In re | Steven James McDonough,   | Case No. |
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|       | Gabriele Charlotte LeMond |          |

|   | -      | _           |   | <del>_</del> |               | 1 -      |                 |
|---|--------|-------------|---|--------------|---------------|----------|-----------------|
| CREDITOR'S NAME,  | CO     | Hu          | sband, Wife, Joint, or Community  | 16           | l U           | P        |                 |
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)  | DEBTOR | C<br>A<br>M | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM<br>IS SUBJECT TO SETOFF, SO STATE. | COXHLXGEX    | L I QU I DATE | DISPUTED | AMOUNT OF CLAIM |
| Account No. 225006111   |        |             | Opened 7/01/00 Last Active 4/01/09  | Т            | T<br>E        |          |                 |
|   | 1      |             | Educational   |              | D             |          |                 |
| Us Dept Of Education  | ı      | l           |   |              |               |          |                 |
| Attn: Borrowers Service Dept  | ı      | Н           |   |              |               |          |                 |
| Po Box 5609   | ı      |             |   |              |               |          |                 |
| Greenville, TX 75403  |        |             |   |              |               |          | 20,744.00       |
| Account No. 374355011750  | T      |             | Opened 6/01/07 Last Active 9/29/08<br>CreditCard  |              |               |          |                 |
| Hose Savings Bank   |        |             | Creditoard  |              |               |          |                 |
| Usaa Savings Bank<br>Po Box 47504   |        | c           |   |              |               |          |                 |
| San Antonio, TX 78265   | ı      |             |   |              |               |          |                 |
|   | ı      |             |   |              |               |          |                 |
|   | ı      |             |   |              |               |          | 15,069.00       |
| A | ┢      | ┢           |   | +            |               |          | ,               |
| Account No. 48894   | ł      |             |   |              |               |          |                 |
| Wareham Fire District   | ı      |             |   |              |               |          |                 |
| 2550 Cranberry Highway  | ı      | c           |   |              |               |          |                 |
| Wareham, MA 02571   | ı      |             |   |              |               |          |                 |
| ,   | ı      |             |   |              |               |          |                 |
|   |        |             |   |              |               |          | 76.78           |
| Account No. 549096010483  |        |             | Opened 5/01/00 Last Active 10/07/08   | T            |               |          |                 |
|   | 1      |             | CreditCard  |              |               |          |                 |
| Wells Fargo Card Ser  | ı      |             |   |              |               |          |                 |
| Po Box 5058   | ı      | C           |   |              |               |          |                 |
| Portland, OR 97208  |        |             |   |              |               |          |                 |
|   |        |             |   |              |               |          | 14,197.00       |
|   | ╀      | _           |   | $\bot$       | _             | _        | 14,137.00       |
| Account No. 603525102157  | 1      |             | Opened 4/01/00 Last Active 4/01/00 CombinedCreditPlan   |              |               |          |                 |
| Zale/cbsd   |        |             |   |              |               |          |                 |
|   | ı      | С           |   |              |               |          |                 |
| Attn.: Centralized Bankruptcy Po Box 20507  | ı      |             |   |              |               |          |                 |
| Kansas City, MO 64195   | ı      |             |   |              |               |          |                 |
| ,   |        |             |   |              |               |          | 0.00            |
| Sheet no. <b>9</b> of <b>9</b> sheets attached to Schedule of   | 1      |             | <u> </u>  | Sub          | tota          | 1        |                 |
|   |        |             | (Total of t   |              |               |          | 50,086.78       |
| Creditors Holding Unsecured Nonpriority Claims  |        |             | (10tal of t   |              |               |          |                 |
|   |        |             |   |              | ota           |          | 026 706 00      |
|   |        |             | (Report on Summary of So  | chec         | lule          | es)      | 936,706.09      |

B6G (Official Form 6G) (12/07)

In re Steven James McDonough, Gabriele Charlotte LeMond

6/02/09 10:28AM

Debtors

#### SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.

Case 09-19276-lbr Doc 1 Entered 06/02/09 10:30:33 Page 31 of 51

B6H (Official Form 6H) (12/07)

| In re | Steven James McDonough,   | Case No. |
|-------|---------------------------|----------|
|       | Cabriele Charlotte LeMond |          |

Debtors

#### **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

6/02/09 10:28AM

6/02/09 10:28AM

| In re | Steven James McDonough Gabriele Charlotte LeMond |           | Case No.   |  |
|-------|--|-----------|------------|--|
|       |  | Debtor(s) | <u>-</u> ' |  |

#### SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

| Debtor's Marital Status:                 | OF DEBTOR AND SPOU  | SE                                  |          |           |          |
|--|---|-------------------------------------|----------|-----------|----------|
| Married                                  | RELATIONSHIP(S): None.  | AGE(S):                             |          |           |          |
| <b>Employment:</b>                       | DEBTOR  |                                     | SPOUSE   |           |          |
| Occupation                               | Car Sales   | greeter                             |          |           |          |
| Name of Employer                         | Used Car Factory  | Consolidated Re                     | sorts    |           |          |
| How long employed                        | 2 weeks   | 3 weeks                             |          |           |          |
| Address of Employer                      | 2109 South Highland Dr.<br>Las Vegas, NV 89109                  | W. Warm Springs<br>Las Vegas, NV 89 |          |           |          |
| INCOME: (Estimate of aver                | rage or projected monthly income at time case filed)            | D.                                  | EBTOR    |           | SPOUSE   |
| 1. Monthly gross wages, sala             | ary, and commissions (Prorate if not paid monthly)              | \$                                  | 5,200.00 | \$        | 1,187.00 |
| 2. Estimate monthly overtime             | e   | \$                                  | 0.00     | \$        | 0.00     |
| 3. SUBTOTAL                              |   | \$                                  | 5,200.00 | \$        | 1,187.00 |
| 4. LESS PAYROLL DEDUC                    |   |                                     | 4 000 00 |           |          |
| a. Payroll taxes and soc                 | cial security   | \$                                  | 1,083.00 | \$        | 200.00   |
| b. Insurance                             |   | \$                                  | 0.00     | \$        | 0.00     |
| c. Union dues                            |   | \$                                  | 0.00     | \$        | 0.00     |
| d. Other (Specify):                      |   | \$                                  | 0.00     | \$        | 0.00     |
|  |   | \$                                  | 0.00     | \$        | 0.00     |
| 5. SUBTOTAL OF PAYRO                     | LL DEDUCTIONS   | \$                                  | 1,083.00 | \$        | 200.00   |
| 6. TOTAL NET MONTHLY                     | TAKE HOME PAY   | \$                                  | 4,117.00 | \$        | 987.00   |
| 7. Regular income from oper              | ration of business or profession or farm (Attach detailed state | ement) \$                           | 0.00     | \$        | 0.00     |
| 8. Income from real property             | 1   | \$                                  | 0.00     | \$        | 0.00     |
| 9. Interest and dividends                |   | \$                                  | 0.00     | \$        | 0.00     |
| dependents listed above                  |   | or that of \$                       | 0.00     | \$        | 0.00     |
| 11. Social security or govern (Specify): | iment assistance  | \$                                  | 0.00     | \$        | 0.00     |
|  |   | <u> </u>                            | 0.00     | \$        | 0.00     |
| 12. Pension or retirement inc            | come  | \$                                  | 0.00     | \$        | 0.00     |
| 13. Other monthly income (Specify):      |   | <u></u>                             | 0.00     | \$        | 0.00     |
|  |   | \$                                  | 0.00     | \$        | 0.00     |
| 14. SUBTOTAL OF LINES                    | 7 THPOLICH 13   | \$                                  | 0.00     | <b>\$</b> | 0.00     |
|  |   | \$                                  | 4,117.00 | <br>\$    | 987.00   |
| 15. AVERAGE MONTHLY                      | INCOME (Add amounts shown on lines 6 and 14)                    | <u> Ф ——</u>                        |          |           |          |
| 16. COMBINED AVERAGE                     | E MONTHLY INCOME: (Combine column totals from line              | 15)                                 | \$       | 5,104     | .00      |

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

B6J (Official Form 6J) (12/07)

| In re | Steven James McDonough Gabriele Charlotte LeMond |           | Case No. |  |
|-------|--|-----------|----------|--|
|       |  | Debtor(s) | _        |  |

### SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22C.

| expenses calculated on this form may differ from the deductions from income anowed on Form 22A or 22   | 2C.           |               |
|--|---------------|---------------|
| $\Box$ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Comple expenditures labeled "Spouse."                                 | ete a separat | e schedule of |
| 1. Rent or home mortgage payment (include lot rented for mobile home)  | \$            | 786.00        |
| a. Are real estate taxes included? Yes No _X_  |               |               |
| b. Is property insurance included? Yes No _X   |               |               |
| 2. Utilities: a. Electricity and heating fuel  | \$            | 150.00        |
| b. Water and sewer   | \$            | 50.00         |
| c. Telephone   | \$            | 15.00         |
| d. Other See Detailed Expense Attachment   | \$            | 195.00        |
| 3. Home maintenance (repairs and upkeep)   | \$            | 20.00         |
| 4. Food  | \$            | 400.00        |
| 5. Clothing  | \$            | 25.00         |
| 6. Laundry and dry cleaning  | \$            | 10.00         |
| 7. Medical and dental expenses   | \$            | 50.00         |
| 8. Transportation (not including car payments)   | \$            | 200.00        |
| 9. Recreation, clubs and entertainment, newspapers, magazines, etc.  | \$            | 100.00        |
| 10. Charitable contributions   | \$            | 0.00          |
| 11. Insurance (not deducted from wages or included in home mortgage payments)  | ·             | _             |
| a. Homeowner's or renter's   | \$            | 0.00          |
| b. Life  | \$            | 84.00         |
| c. Health  | \$            | 440.00        |
| d. Auto  | \$            | 100.00        |
| e. Other   | \$            | 0.00          |
| 12. Taxes (not deducted from wages or included in home mortgage payments)  | · —           |               |
| (Specify)  | \$            | 0.00          |
| 13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan)   | Ψ <u></u>     |               |
| a. Auto  | \$            | 525.00        |
| b. Other   | \$            | 0.00          |
| c. Other   | \$            | 0.00          |
| 14. Alimony, maintenance, and support paid to others   | \$            | 1,500.00      |
| 15. Payments for support of additional dependents not living at your home  | \$            | 0.00          |
| 16. Regular expenses from operation of business, profession, or farm (attach detailed statement)   | \$            | 0.00          |
| 17. Other Association  | \$            | 135.00        |
| Other Second auto gas/maintenance  | \$            | 150.00        |
| 18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.) | \$            | 4,935.00      |
| 19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document:                                 | _             |               |
| 20. STATEMENT OF MONTHLY NET INCOME  | ф             | E 404 00      |
| a. Average monthly income from Line 15 of Schedule I   | \$            | 5,104.00      |
| b. Average monthly expenses from Line 18 above   | \$            | 4,935.00      |
| c. Monthly net income (a. minus b.)  | 3             | 169.00        |

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B6J (Official Form 6J) (12/07)
Steven James McDonough

|       | Steven James McDonough    |           |          |  |
|-------|---------------------------|-----------|----------|--|
| In re | Gabriele Charlotte LeMond |           | Case No. |  |
|       |                           | Debtor(s) |          |  |

## SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S) Detailed Expense Attachment

| Other | <u>Utility</u> | Expenditures: |
|-------|----------------|---------------|
|-------|----------------|---------------|

| Cell                             | <br>120.00   |
|----------------------------------|--------------|
| gas                              | \$<br>60.00  |
| trash                            | \$<br>15.00  |
| Total Other Utility Expenditures | \$<br>195.00 |

**B6 Declaration (Official Form 6 - Declaration).** (12/07)

6/02/09 10:28AM

## **United States Bankruptcy Court District of Nevada**

| In re | Steven James McDonough Gabriele Charlotte LeMond |           | Case No. |    |
|-------|--|-----------|----------|----|
|       |  | Debtor(s) | Chapter  | 13 |

#### DECLARATION CONCERNING DEBTOR'S SCHEDULES

#### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

|      | 1 1 1 3 1    | I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of sheets, and that they are true and correct to the best of my knowledge, information, and belief. |  |  |  |  |
|------|--------------|---|--|--|--|--|
| Date | June 2, 2009 | Signature   | /s/ Steven James McDonough             |  |  |  |
|      |              |   | Steven James McDonough Debtor          |  |  |  |
| Date | June 2, 2009 | Signature   | /s/ Gabriele Charlotte LeMond          |  |  |  |
|      |              | -   | Gabriele Charlotte LeMond Joint Debtor |  |  |  |

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

B7 (Official Form 7) (12/07)

### United States Bankruptcy Court District of Nevada

| In re | Steven James McDonough Gabriele Charlotte LeMond |           | Case No. |    |
|-------|--|-----------|----------|----|
|       |  | Debtor(s) | Chapter  | 13 |
|       |  |           | •        |    |

#### STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

#### 1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

\$9,250.00 2009 YTD: Both Income From Business or Employment \$49,175.00 2007: Both Income From Business or Employment

#### 2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

## 3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts.* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS DATES OF AMOUNT STILL OF CREDITOR PAYMENTS AMOUNT PAID OWING

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,475. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT
DATES OF PAID OR
PAYMENTS/ VALUE OF AMOUNT STILL
NAME AND ADDRESS OF CREDITOR TRANSFERS TRANSFERS OWING

DATE OF PAYMENT

c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

BENEFIT PROPERTY WAS SEIZED

AMOUNT STILL

OWING

AMOUNT PAID

**PROPERTY** 

4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT

AND CASE NUMBER

NATURE OF PROCEEDING

COURT OR AGENCY

AND LOCATION

DISPOSITION

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not

filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE

DESCRIPTION AND VALUE OF

DATE OF SEIZURE

#### 5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER DATE OF REPOSSESSION,
FORECLOSURE SALE,
TRANSFER OR RETURN

DESCRIPTION AND VALUE OF
PROPERTY

#### 6. Assignments and receiverships

None

e a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATE OF

NAME AND ADDRESS OF ASSIGNEE ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND LOCATION

NAME AND ADDRESS OF CUSTODIAN OF COURT CASE TITLE & NUMBER DATE OF ORDER DESCRIPTION AND VALUE OF

PROPERTY

## 7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION

RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

#### 8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

## 9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE DeLuca & Associates 5830 West Flamingo Road Suite 233 Las Vegas, NV 89103 DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY
\$1,800.00

#### 10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY

## 11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

#### 12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

#### 13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

NAME AND ADDRESS OF OWNER

DATE OF SETOFF

AMOUNT OF SETOFF

## 14. Property held for another person

None List all property owned by another person that the debtor holds or controls.

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

#### 15. Prior address of debtor

None

If the debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

## 16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

#### 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL GOVERNMENTAL UNIT NOTICE LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

■ Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL GOVERNMENTAL UNIT NOTICE LAW

SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which

the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

SITE NAME AND ADDRESS

DOCKET NUMBER

STATUS OR DISPOSITION

#### 18. Nature, location and name of business

None

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six vears immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN

NAME (ITIN)/ COMPLE
Back to Basics 0611

ADDRESS 855 N. Stephanie #2721 Henderson, NV 89014 BEGINNING AND NATURE OF BUSINESS ENDING DATES

3/2002 - current

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

None

NAME ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

#### 19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS DATES SERVICES RENDERED

None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME ADDRESS DATES SERVICES RENDERED

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME ADDRESS

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS DATE ISSUED

20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY

(Specify cost, market or other basis)

None b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above.

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY

DATE OF INVENTORY RECOR

21. Current Partners, Officers, Directors and Shareholders

None a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS NATURE OF INTEREST PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns,

controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NATURE AND PERCENTAGE
NAME AND ADDRESS
TITLE
OF STOCK OWNERSHIP

22. Former partners, officers, directors and shareholders

None a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the

commencement of this case.

NAME ADDRESS DATE OF WITHDRAWAL

None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** 

immediately preceding the commencement of this case.

NAME AND ADDRESS TITLE DATE OF TERMINATION

23 . Withdrawals from a partnership or distributions by a corporation

None If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation

in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS
OF RECIPIENT,
DATE AND PURPOSE
OF WITHDRAWAL
OF WITHDRAWAL
OF MOUNT OF MONEY
OR DESCRIPTION AND
VALUE OF PROPERTY

24. Tax Consolidation Group.

None If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated

group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

25. Pension Funds.

None If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND TAXPAYER IDENTIFICATION NUMBER (EIN)

## DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

| Date | June 2, 2009 | Signature | /s/ Steven James McDonough    |
|------|--------------|-----------|-------------------------------|
|      |              |           | Steven James McDonough        |
|      |              |           | Debtor                        |
| Date | June 2, 2009 | Signature | /s/ Gabriele Charlotte LeMond |
|      |              |           | Gabriele Charlotte LeMond     |
|      |              |           | Joint Debtor                  |

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

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6/02/09 10:28AM

## **United States Bankruptcy Court District of Nevada**

| In r | Steven James McDonough re Gabriele Charlotte LeMond  |  | Case No.                           |                                   |  |  |  |
|------|--|--|------------------------------------|-----------------------------------|--|--|--|
| ***  |  | Debtor(s)  | Chapter                            | 13                                |  |  |  |
|      | DISCLOSURE OF COMPENSAT  | ΓΙΟΝ OF ATTO                                       | RNEY FOR D                         | EBTOR(S)                          |  |  |  |
| 1.   | Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:  |  |                                    |                                   |  |  |  |
|      | For legal services, I have agreed to accept  |  | \$                                 | 1,800.00                          |  |  |  |
|      | Prior to the filing of this statement I have received  |  | \$                                 | 1,800.00                          |  |  |  |
|      | Balance Due  |  | \$                                 | 0.00                              |  |  |  |
| 2.   | \$   |  |                                    |                                   |  |  |  |
| 3.   | The source of the compensation paid to me was:   |  |                                    |                                   |  |  |  |
|      | ■ Debtor □ Other (specify):  |  |                                    |                                   |  |  |  |
| 4.   | The source of compensation to be paid to me is:  |  |                                    |                                   |  |  |  |
|      | ■ Debtor □ Other (specify):  |  |                                    |                                   |  |  |  |
| 5.   | ■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.   |  |                                    |                                   |  |  |  |
|      | ☐ I have agreed to share the above-disclosed compensation w copy of the agreement, together with a list of the names of the same of the copy of the agreement.   |  |                                    |                                   |  |  |  |
| 6.   | In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:  |  |                                    |                                   |  |  |  |
|      | <ul> <li>a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;</li> <li>b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;</li> <li>c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;</li> <li>d. [Other provisions as needed]</li> </ul> |  |                                    |                                   |  |  |  |
| 7.   | By agreement with the debtor(s), the above-disclosed fee does not representation of the debtors in any discharge any other adversary proceeding.   | not include the followin<br>geability actions, jud | g service:<br>licial lien avoidand | ces, relief from stay actions or  |  |  |  |
|      | CER  | RTIFICATION  |                                    |                                   |  |  |  |
|      | I certify that the foregoing is a complete statement of any agrees is bankruptcy proceeding.   | ment or arrangement for                            | r payment to me for r              | epresentation of the debtor(s) in |  |  |  |
| Date | ated: June 2, 2009   | /s/ Anthony J. De                                  | eLuca                              |                                   |  |  |  |
|      | ·  | Anthony J. DeLu                                    | ıca                                |                                   |  |  |  |
|      |  | DeLuca & Assoc                                     |                                    |                                   |  |  |  |
|      |  | 5830 West Flami<br>Suite 233                       | ngo Road                           |                                   |  |  |  |
|      |  | Las Vegas, NV 8                                    | 9103                               |                                   |  |  |  |
|      |  |  | Fax: (702) 873-590                 | 13                                |  |  |  |

# **United States Bankruptcy Court District of Nevada**

| In re   | Steven James McDonough Gabriele Charlotte LeMond |  | Case No. |                     |
|---------|--|--|----------|---------------------|
|         |  | Debtor(s)  | Chapter  | 13                  |
| The abo |  | RIFICATION OF CREDITOR MA  that the attached list of creditors is true and correct |          | of their knowledge. |
| Date:   | June 2, 2009                                     | /s/ Steven James McDonough   |          |                     |
|         |  | Steven James McDonough   |          |                     |
|         |  | Signature of Debtor  |          |                     |
| Date:   | June 2, 2009                                     | /s/ Gabriele Charlotte LeMond  |          |                     |
|         |  | Gabriele Charlotte LeMond  |          |                     |

Signature of Debtor

Steven James McDonough Gabriele Charlotte LeMond 855 N. Stephanie St # 2721 Henderson, NV 89014

Anthony J. DeLuca DeLuca & Associates 5830 West Flamingo Road Suite 233 Las Vegas, NV 89103

Allison McKella 547 Ulukanu St Kailua, CA 93734

Americas Servicing Co Acct No 1061146007730 Attention: Bankruptcy 1 Home Campus Des Moines, IA 50328

Americas Servicing Co Acct No 1061146003498 Attention: Bankruptcy 1 Home Campus Des Moines, IA 50328

## Amex

Acct No 008061883011397743 Po Box 297871 Fort Lauderdale, FL 33329

#### Amex

Acct No 008061883011322332 Po Box 297871 Fort Lauderdale, FL 33329

Antonio Gucci AKA Antonio Gonsalves 3351 W. Lani Ikena Way Kihei, HI 96753

Brigham and Women's Hospital Acct No 22702435 PO Box 3320 Boston, MA 02241-3320

BWPO Anesthesia Acct No 22702435-1 PO Box 3681 Boston, MA 02241-3681 BWPO Dept of Medicine Acct No 22702435 PO Box 3775 Boston, MA 02241-3775

BWPO Dept of Radiology Acct No 22702435 PO Box 414124 Boston, MA 02241-0001

C.Eugene Hill, JR, DPM, PC Acct No 23959 51 Main St. Hyannis, MA 02601

Cape Cod Dental 40 Church Ave. Ste 101 Wareham, MA 02571

Capital 1 Bank Acct No 529107156160 Attn: C/O TSYS Debt Management Po Box 5155 Norcross, GA 30091

Capital 1 Bank Acct No 438864250136 Attn: C/O TSYS Debt Management Po Box 5155 Norcross, GA 30091

Capital Management Services Acct No 61170984 726 Exchange Street Ste 700 Buffalo, NY 14210

Chase Acct No 426683999988 201 N. Walnut St//De1-1027 Wilmington, DE 19801

Chase Acct No 540168303600 Attn: Bankruptcy Dept Po Box 100018 Kennesaw, GA 30156

Citi Acct No 542418016395 Po Box 6241 Sioux Falls, SD 57117 Clinical 1 Home Medical Acct No 00052213 65 E. Mathewson Drive East Weymouth, MA 02189

CMI Credit Management Acct No 773-10-210-0237934 4200 International Pkwy Carrollton, TX 75007-1906

Cpu/citi Acct No 630448652 Attn: Centralized Bankruptcy Po Box 20507 Kansas City, MO 64195

Direct Merchants Bank Acct No 545800110704 Card Member Services - GSC Po Box 5246 Carol Stream, IL 60197

Discover Fin Acct No 601129862199 Attention: Bankruptcy Department Po Box 3025 New Albany, OH 43054

Discover Financial Ser Acct No 6000095543 P.o Box 5005 Sioux Fall, SD 57117

Enhanced Recovery Corp. Acct No 7028985158777 8014 Bayberry Rd. Jacksonville, FL 32256

First Premier Bank Acct No 4869557469102371 3820 N Louise Ave Sioux Falls, SD 57104

Flagstar Bank Acct No 274998321211 Attn: Bankruptcy Dept MS-S144-3 5151 Corporate Dr Troy, MI 48098

Ford Motor Credit Corporation Acct No FGN195TH18 National Bankruptcy Center Po Box 537901 Livonia, MI 48153 Hsbc Bank Acct No 549107001658 Attn: Bankruptcy Po Box 5253 Carol Stream, IL 60197

Hsbc/berpl Acct No 91100022797 Pob 15521 Wilmington, DE 19805

Jameson B. Noorda, DPM Acct No LEMGA1001 4660 S.Eastern #16 Las Vegas, NV 89119-6146

LV Skin & Cancer Clinics, LTD Acct No 719802 PO BOX 12060 Las Vegas, NV 89112

M&t Bank Acct No 11000197303740001 1 Fountain Plz Fl 3 Buffalo, NY 14203

Macys/fdsb Acct No 4483892644120 Macy's Bankruptcy Po Box 8053 Mason, OH 45040

Maple Springs I Acct No MCDON 158 Tihonet Road Wareham, MA 02571

Mortgage Service Cente Acct No 9540021242052 Sbrp - 4001 Leadenhall Rd Mt Laurel, NJ 08054

NCO Financial Systems Inc Acct No 5206159 PO Box 953 Brookfield, WI 53008

NCO Portfolio Management Acct No DQS814 1705 Whitehead Road Gwynn Oak, MD 21207 Nevada Association Services, Inc. Acct No N44967 6224 W Desert Inn Road, Suite A Las Vegas, NV 89146

New Century Mortgage C Acct No 1002705978 Po Box 15298 Wilmington, DE 19850

New Century Mortgage C Acct No 1002694016 Po Box 15298 Wilmington, DE 19850

NStar Acct No 2768-350-0022 PO Box 4508 Woburn, MA 01888-4508

Peter Roberts & Associates Acct No 14221014 231 E. Main St. Ste. 201 Milford, MA 01757-2821

Roby's Propane Gas Inc. Acct No 73461 PO Box 129 West Wareham, MA 02576

Sallie Mae Acct No 99901104271000120080801 Attn: Claims Dept Po Box 9500 Wilkes Barre, PA 18773

South Shore Anesthesia Assoc Acct No 130862P 163 Libby Pkwy Ste. 301 East Weymouth, MA 02189

South Shore Hospital Acct No VO6167704763 55 Fogg Road South Weymouth, MA 02190

Unvl/citi
Acct No 539680001628
Attn.: Centralized Bankruptcy
Po Box 20507
Kansas City, MO 64195

Us Dept Of Education Acct No 225006111 Attn: Borrowers Service Dept Po Box 5609 Greenville, TX 75403

Usaa Savings Bank Acct No 374355011750 Po Box 47504 San Antonio, TX 78265

Wareham Fire District Acct No 48894 2550 Cranberry Highway Wareham, MA 02571

Wells Fargo Card Ser Acct No 549096010483 Po Box 5058 Portland, OR 97208

Zale/cbsd Acct No 603525102157 Attn.: Centralized Bankruptcy Po Box 20507 Kansas City, MO 64195